

POSITION	INITIALS	ID NO.	DATE	
		10 /10.		
FEE DETERMINATION	2/			
O.I.P.E. CLASSIFIER	7.4.		12/21/59	
FORMALITY REVIEW			01103,30	
RESPONSE FORMALITY REVIEW	功	100-4	/ /	
		10303	1-10/3-1	

INDEX OF CLAIMS

~	Rejected	N	
=	Allowed		lected
_	(Through numeral) Canceled	Interfe	erence
÷		A Appea	d .
	nestricted	OOhiect	hod

— (Titrough h	umeral) Canceled	Α	Appeal	euce
÷	Restricted	0	Objecte	.4
				u
m Date	Claim	Date	1	·
in land		Tilli	Claim	Date
in the state of th	Final		m	
0 10 10	Final		Final Original	
		 	E 등	1 1 1 1 1 1 1 1
	51		101	┦╌┦╌╏╌╏ ╌╏
╶┊┋┊┋	52		102	 - - - - - - - - - - - - - - - - - - -
	53	 		
	54	┼╾┼╾┼╾┼╾┤	103	
	55	┾╾┼╼┼╌╀╌╀╌┦	104	
	56		105	
1 000	57	 	106	
® MMMM		 	107	┈ ╂┈╂┈╂┈╂┈╂┈╂
9 1 1 1	58		108	
	59		109	
	60		110	
	61		1	
	62	 	111	
	63	┞╼┼┈┤╸┤ ╾ ┤ ┈┤	112	
	64		113	
	65		114	
	1 -i 		115	╺ ╀ ╶┼ ╶┼ ╶╎
	66		116	╶╂┈┽┈┼┈┼┈┤┈┤
18 1	67		117	- - - - - -
	68		118	
	69			
(2D)	70		119	
	71		120	
(22)			121	1-1-1-1-1-1
23	72		122	┤╸┤╺┼╸┼ ╶┼╶┤
24	73		123	+-+-+-+-+-
25	74		124	
26	75		F	
	76		125	
27	77		126	
	78	++-+-	127	
	79	+	128	
30	80	 	129	
31			130	├─┼─┼─┼─┼─┼
32	81		131	╏╸╉╺╃╸╃╸╏╸┩╸ ┩
33	82		132	
34	83	T - - -	133	
35	84	┼╸┼╺┼╸┼╸ ┤ ├		
36	85	╎╸╎╸╎╸╎╸ ┤╸╎	134	
	86	┝╶┼╌┼╌ ┤ ┟	135	
37	87	├─┼─┼ ─┼─┤	136	
38	88		137	
39	89	 - - - - - - -	138	
40			139	
41 - 41	90		140	-+-+-+
42	91	┈╎╶┤╸╎╸ ┤	141	
	92	╼┼╼┼╼┼╾┤╸├╴		
43	93	╼┼┼┼┼┤╎	142	
44	94	╼┼╼┾╼┼╸╎	143	
45	95		144	
46			145	++++
47	96		146	++-+-+
48	97		147	
49	98			+
┈╎╒┋┝┈╎┈┤┈╎┈╎┈╎	99		148	+
50	100		149	, · · · · · · · · · · · · · · · · · · ·
-			150	

Nov.

If more than 150 claims or 10 actions staple additional sheet here